STATEMENT OF

FORM 1	ORGANIZATI (See instructions)	ION	Office use only
1. NAME OF COMMITTEE (in	(Check if name full) is changed)	Example: If typying, type over the lines	12FE4M5
CBS Corporat	on Political Action Committee		
ADDRESS (number and	601 Pennsylvania Ave N	W	
(Check if address is changed)	Suite,540	11111111	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Washington		DC 20004 -
	CIT	Y▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA	L ADDRESS (Please provide only one e-mail a	address)	
(Check if address X is changed)	alcox@comerica.com		
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
(Check if address is changed)	<u> </u>		
			<u> </u>
2. DATE 0.3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICA	TION NUMBER C	C00423442	
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)	
I certify that I have exam	ned this Statement and to the best of my knowledg	e and belief it is true, correct and	complete
Type or Print Name of	Treasurer James W. Hoeberling	3	
Signature of Treasurer	Electronically Filed by James W. Hoe	eberling [pate 03 / 12 / YYYYY
NOTE: Submission of fa	se, erroneous, or incomplete information may subj	,	•
Office Use Only		For further information co Federal Election Commission Toll Free 800-424-9530	